IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial Number: 10/788,645 Confirmation Number: 7249							
Title: <u>Selective Termination of Wireless Connections to Refresh Signal Information in Wireless Node Location Infrastructure</u>							
Attorney Docket Number: 6561/53797							
ISSUE FEE TRANSMITTAL LETTER							
Commissioner for Patents Mail Stop Issue Fee P.O. Box 1450 Alexandria, VA 22313-1450							
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1. X Issue Fee Transmittal (PTOL-85B).							
2 A check in the amount of \$ is enclosed.							
3. X Credit card payment in the amount of \$1400 paid by EFS-Web.							
4. A verified statement claiming small entity status is enclosed, since this application has now been assigned.							
5 An amendment under 37 CFR 1.312.							
September 13, 2007 Date Mark James Spolyar Mark James Spolyar Attorney for Applicant(s) Reg. No. 42164							
Mark James Spolyar 2200 Cesar Chavez Street, Suite 8 San Francisco, CA 94124 415-826-7966							

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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maintenance fee notificat	tions.			*	., , ,		
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30505	7590 06/28	/2007	1144				
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SAN FRANCIS	CO, CA 94124					(Depositor's name)	
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTA A	DRNEY DOCKET NO.	CONFIRMATION NO.	
10/788,645	02/27/2004		Robert J. Friday		6561/53797	7249	
TITLE OF INVENTION: SELECTIVE TERMINATION OF WIRELESS CONNECTIONS TO REFRESH SIGNAL INFORMATION IN WIRELESS NODE LOCATION INFRASTRUCTURE							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE,FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	09/28/2007	
EXAM	INER	ART UNIT	CLASS-SUBCLASS]			
CASCA, FRED A		2617	455-456000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Airespace, Two. San Jose, CA Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government							
Issue Fee Dublication Fee (No small entity discount permitted) Advance Order - # of Copies			A check is enclosed. A check is enclosed.				
5. Change in Entity Sta			Dh. Amalinant is no los	nger claiming SMALL EN	ITITY atotus Sec 27 C	ED 1 27(a)(2)	
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